EMBOLI MITIGATION IN NON-VALVULAR ATRIAL FIBRILLATION (AFIB)

(Updated 08/26/2020)

The **CHA2DS2-VASc** score is used to estimate thromboembolic risk in atrial fibrillation and inform emboli mitigation requirements. Annual stroke risk increases with increasing score. The following emboli mitigation strategies are acceptable for FAA medical certificate purposes:

CHA2DS2-VASc Score	Required Emboli Mitigation
	Coumadin/warfarin; or
2 or higher	NOAC/DOAC or
	LAA closure
0-1	Emboli mitigation usually not required for FAA purposes.

CHA2DS2-VASc	Score
Congestive heart failure	1
Hypertension	1
Age > 75	2
Diabetes mellitus	1
Previous stroke/TIA/TE	2
Vascular disease (prior MI, PAD, or aortic	1
plaque/atheroma)	
Age 65-74	1
Female (Male = 0)	1
Total	

Warfarin (Coumadin): For applicants who are just beginning warfarin (Coumadin) treatment
he following is required:
☐ Minimum observation time of 6 weeks after initiation of warfarin therapy;
☐ Must also meet any required observation time for the underlying condition; AND
☐ 6 INRs, no more frequently than 1 per week
 80% or more of INR values should be between 2.0 and 3.0.
 When used for heart valves, INR goal should be in accordance with standard of
care for that type of valve: and
 If INR is outside this target range, the physician should explain.

NOAC/DOACs: For applicants who are just beginning treatment the following is required:

☐ Minimum observation time of 2 weeks after initiation of therapy; AND

☐ Must also meet any required observation time for the underlying condition.